#### **Application Data Sheet**

Application Inf rmation

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit:: 2624

CD-ROM or CD-R?:: None

Title:: Method for Processing Aggregate Print Jobs

Attorney Docket Number:: MPJ-D6

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 33

Small Entity:: Yes

Petition Included:: No

Secrecy Order in Parent Appl.?::

**Applicant Information** 

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Robert

Family Name:: Keane

City of Residence:: Arlington

State of Province of Residence:: MA

Country of Residence:: US

Street of mailing address:: 4 Mystic Bank Road

City of mailing address:: Arlington

State or Province of mailing address:: MA

Postal or Zip Code of mailing address:: 02474

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Applicant Authority Type:: Inventor

Primary Citizenship Country:: CA and FR

Status:: Full Capacity

Given Name:: Erik

Family Name:: Robertson

City of Residence:: Sainte Maxime

State of Province of Residence::

Country of Residence:: FR

Street of mailing address:: Allee de la Chenaie

City of mailing address:: Sainte Maxime

State or Province of mailing address::

Postal or Zip Code of mailing address:: 83120

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FR

Status:: Full Capacity

Given Name:: Sebastien

Family Name:: Coursol

City of Residence:: Montauroux

State of Province of Residence::

Country of Residence:: FR

Street of mailing address:: Quartier Subrane

City of mailing address:: Montauroux

State or Province of mailing address::

Postal or Zip Code of mailing address:: 83440

**Correspondence Information** 

Correspondence Customer Number:: 37420

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#### Repr entative Inf rmation

Representative Customer Number::

37420

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Division of	09/557,571	04/25/00

## Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
France	00 00931	01/25/00	Yes

# **Assignment Information**

Assignee Name::